

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	11/27/00
FORMALITY REVIEW	CM	71632	2/14/01
RESPONSE FORMALITY REVIEW	PB	71622	3/18/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 -+ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓ 3/2/02
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓ 4/2/02
52	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy